PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09728889

CLAIMS AS FILED - PART I									SMALL ENTITY			OTHER THAN	
_	· · · · · · · · · · · · · · · · · · ·		(Column	1)				TYPE		OR	SMALL		
TOTAL CLAIMS			14				ſ	RATE	FEE]	RATE	FEE	
FOR			NUMBER	FILED	NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			14 minus 20=		* 6			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		* 10			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL	-	OR	TOTAL	7/0-00		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL I	ENTITY	OR	OTHER SMALL	THAN	
AMENDMENT A	1	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT		RATE	ADDI- JIO NAL FEE) RATE	ADDI- TIONAL FEE	
	Total *	14	Minus	** 0	70	= 0		X\$ 9=		OR	X\$18=		
	Independent FIRST PRESEN		Minus JLTIPLE DEF	*** PENDENT	S CLAIM	=		X40=		OR-	X80=		
							'	+135=		OR	+270=		
							_ .A	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)										•			
AMENDMENT B	B	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA	Tables of the	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total *	14	Minus	**	<u> 20</u>	1		X\$ 9=		OR	X\$18=	. T	
	Independent *	3	Minus	***	3_	=		X40=	1	OR	X80=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╹	+135=		OR	+270=		
							TOTAL			TOTAL			
		(Column 1)		(Colur	mn 2)	(Column 3)	, A	DDIT. FEE		JOI1	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total *		Minus	** 0	30	=		X\$ 9=_		OR	X\$18≡		
	independent *		Minus	*** PENDENT	CLAIM	[=	-	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=									OR	+270=		
* **	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										TOTAL		
***	If the "Highest Number The "Highest Number The "Highest Number	per Previously Pa	id For" IN THI	S SPACE is	s less thai	n 3, enter "3,"	AL	DDIT. FEE L ad in the app	ropriate box	,	ADDIT. FEE I umn 1.		